## BIRCH, STEWART, KOLASCH & BIRCH, LLP

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ATTORNEY DOCKET NO. 0943-0142P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: OPTICAL MEASURING APPARATUS AND METHOD

insert Title:	→							
		the specification of which is attached	l hereto. If not attached hereto,					
Fill in Appropriate	е	the specification was filed o	n			;	as	
Information —	4	United States Application No	ımber				<b>;</b>	
For Use Without	•				(if applica		or	
Specification			ı					
Attached:			ımber					
		amended under PCT Article 1	9 on		(i	f applicable	e)	
•			•		•			
		I hereby state that I have reviewed by any amendment referred to above	and understand the contents of the	above identified sp	ecification, including th	e claims, as	amended	
• •		I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.						
	٠.	thereof, or patented or described in a prior to this application, that the same application, that the invention has no application in any country foreign to more than twelve months (six months on this invention has been filed in a representatives or assigns, except as f	was not in public use or on sale in of been patented or made the subjite United States of America on an sofor designs) prior to this applicating country foreign to the United Sollows.  In the states of America on an answer of the United Sollows.  In the states of the United States	try before my or of the United States ect of an inventor application filed ion, and that no a tates of America	our invention thereof or of America more than r's certificate issued be by me or my legal repre pplication for patent or prior to this application d) of any foreign applic	r more than one year profore the da esentatives of inventor's of the by me or eation(s) for	one year ior to this ate of this or assigns certificate my legal	
•		•						
Toward Bulletin		Prior Foreign Application(s	)			Priority (	Claimed	
Insert Priority Information:	_	2002-334155	Japan	11/18/2		$\boxtimes$		
(if appropriate)	7	(Number)	(Country)	(Month	/ Day / Year Filed)	Yes	No	
		2002-340679	Japan	11/25/		_ 🗵		
		(Number)	(Country)	(Month	/ Day / Year Filed)	Yes	No	
		(Number)	(Country)	(Month	/ Day / Year Filed)	Yes	No	
						_ 📙	Ü	
•		(Number)	(Country)	(Month	/ Day / Year Filed)	Yes	No	
Insert Provisional Application(s): (if any)	<b>→</b>	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.  (Application Number) (Filing Date)						
(9)		(Application Number)				(Eller Data)		
		All Foreign Applications if any for	•	(Filing Date)				
		All Foreign Applications, if any, for the Filing Date of This Application:						
Insert Requested Information: (if appropriate)	<b>→</b>	Country	Application Nur	mber 	Date of Filing (Month	/ Day / Yes	ar)	
		I hereby claim the benefit under Title insofar as the subject matter of each of in the manner provided by the first p which is material to patentability as de date of the prior application and the	f the claims of this application is no aragraph of Title 35, United States fined in Title 37, Code of Federal I	ot disclosed in the Code, §112, I acl Regulations, §1.56	prior United States and knowledge the duty to which became availab	d/or PCT ap	oplication formation	
Insert Prior U.S.	_							
Application(s):   (if any)  Page 1 of 2		(Application Number)	(Filing Date)		(Status — patented, pe	nding, aban	idoned)	
		(Application Number) (Filing Date) (Status —		(Status — patented, pe	- patented, pending, abandoned)			

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
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Send Correspondence to:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such

FOLLOWING:	willful false statements may	jeopardize the validity o	f the application or any patent is	sued thereon.	-		
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE			DATE* 08/11/03	
Insert Name of Inventor	Masahiro	Kimura	masahiro	Kimo	va	08/11/03	
Insert Date This Document is Signed	Residence (City, State & Country	()			CITIZENSHIP		
Insert Residence	Wako-shi, Saitama-ken, Japan				Japan		
Insert Post Office Address	POSTOFFICE ADDRESS (Complete Street Address including City, State & Country) c/o Honda R&D Co., Ltd. 4-1, Chuo 1-chome, Wako-shi, Saitama-ken, Japan						
Full Name of Second						T DATE:	
Inventor, if any: see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE			DATE*	
	Residence (City, State & Country				CITIZENSHIP	-	
	POST OFFICE ADDRESS (Compl	ete Street Address including (	City, State & Country)		·		
Full Name of Third		···					
Inventor, if any see above	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE			DATE*	
	Residence (City, State & Country	)			CITIZENSHIP	I	
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
full Name of Fourth		-			•		
Inventor, if any see above	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE			DATE*	
	Residence (City, State & Country)				CTTZENSHIP		
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
full Name of Fifth Inventor, if any see above	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE			DATE*	
	Residence (City, State & Country)				CITIZENSHIP		
	POST OFFICE ADDRESS (Comple	te Street Address including C	City, State & Country)	1			